

PO1000018487

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)922-4801

From: Account Name : GARSOZA SERVICES, INC.
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FLORIDA PROFIT CORPORATION OR P.A.

VIRGI CORP

Certificate of Status	1
Certified Copy	0
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ARTICLES OF INCORPORATION
OF
VIRGI CORP

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

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ARTICLE I NAME

The name of the corporation shall be:

VIRGI CORP

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

22605 SW 66th Ave., Apt# 409B
Boca Raton, FL 33428

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

One hundred (100) common shares at no Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Maria A Cagnolatti
22605 SW 66th Ave., Apt# 409B
Boca Raton, FL 33428

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ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are);

Maria A Cagnolatti
22605 SW 66th Ave., Apt# 409B
Boca Raton, FL 33428

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

_____ 19th _____ day of _____ February _____, 2001.

M. Cagnolatti

Signature

N/A

Signature

N/A

Signature

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

VIRGI CORP

2. The name and address of the registered agent and office is:

Maria A Cagnolatti

(Name)

22605 SW 66th Ave., Apt# 409B

(Address - P.O.Box not acceptable)

Boca Raton, FL 33428

(City, State & Zip)

Having been named as registered agent and to accept service of process for the above state corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Signature)

2/19/01

(Date)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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